

Attachment A

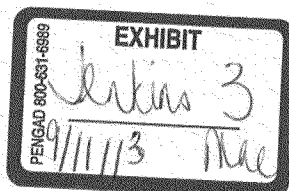
Waste Recycling
Questionnaire

Division GAS OPERATIONS
 Facility Name GAS METER & MEASUREMENT Dept.
 Location 1900 S. Broadway.
 Facility Contact: R. Kingdom Richard
 Name Supervisor
 Title 8122
 System Number

Please attach any additional pages you need to answer the questions completely,
 or add any wastes not included that you feel need to be considered.

Question 1: Does this facility engage in any of the following operations?

Activity	Yes	No
Automotive Maintenance	—	✓
Chemical (i.e., injection of additives)	—	✓
Degreasing of Equipment/Areas (solvent usage)	✓	—
Laboratory Analysis	—	✓
Lagooning or Landfill of Waste Materials	—	✓
Medical Treatment	—	✓
Painting <u>under Gas reg. step.</u>	✓	✓
Pesticide/Preservative Application	—	✓
Spill Cleanup of Controlled Substances (I.E., oil, PCB's, pesticides, solvents)	—	✓
Storage of Materials for Future Disposal	—	✓
Storage of Material for Reclaim or Re-use	—	✓



DP&L_0004585

Attachment A (Page 2)

Question 2: For each activity from Question 1 which occurs at this facility, where are the wastes being discarded?

Example:

<u>Activity</u>	<u>Waste</u>	<u>Intermediate Disposal</u>	<u>Final Removal/Disposal</u>
Automotive Maintenance	Oil Empty Containers Drained Coolant	On site buried tank dumpster	Waste oil con- tractor County landfill Storm sewer

<u>Activity</u>	<u>Waste</u>	<u>Intermediate Disposal</u>	<u>Final Removal/Disposal</u>
CLEANING EQUIPMENT PARTS	USED SOLVENT	STORAGE CAN	CONTRACTOR DISPOSAL

Question 3: Which of these wastes are disposed of in quantities equal to or greater than 1000 kilograms (2200 lbs) in any calendar month?
Include materials accumulated for later disposal at these quantities.

Waste

Estimated Quantity

NONE